NATIONAL ENDOWMENT FOR THE ARTS

Grants for Organizations

APPLICATION FORMS

Heritage & Preservation
Education & Access
Creation & Presentation
Planning & Stabilization

NATIONAL ENDOWMENT FOR THE ARTS

FISCAL YEARS 1996–97

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1. Label (See instructions on page 44 of the Grants to Organizations Application Guidelines booklet.) Otherwise type your:

Name (official IRS name)
Address (number and street)
City, State and ZIP code + 4

FOR FISCAL AGENTS, PARENT INSTITUTIONS, and CONSORTIA (see pages 7-8). If you are acting as the fiscal agent for another organization, type in "FISCAL AGENT FOR" and the name of that organization in this space. If you are the parent institution acting on behalf of an eligible separate component, type in "ON BEHALF OF" followed by the name of the separate component. If you are the lead member of a consortium, type in "CONSORTIUM LEAD APPLICANT" followed by a list of consortium members (attach a separate sheet if you need additional space).

2. Employer Identification #:

3. Total Amount Requested: $

4. Organization Type: (use codes 01 to 22. See page 45 of the Application Guidelines for explanation.)

5. Theme of Project: (use codes 001 to 004. See page 45.)

6. Discipline Most Relevant To Your Project: (use codes 23 to 32. See page 45.)

7. Total Project Cost: $

8. Period of Support : Requested (Use 2-digit numerals, e.g., 11/01/96 for Nov. 1, 1996)

FROM: _____ month/day/year → → → TO: _____ month/day/year

9. Project Director.
Enter the following information:

Name of Project Director
Area code/Phone
FAX, E-mail and/or WWW, where available

Mr. ☐ Ms. ☐

10. Authorizing Official (see also #22 on page v).

Enter the following information:

Name of Authorizing Official
Title of Authorizing Official
Area code/Phone
FAX, where available

Mr. ☐ Ms. ☐

X _____ Signature _____ Date Signed

THIS APPLICATION FORMS BOOKLET MUST BE USED IN CONJUNCTION WITH THE ARTS ENDOWMENT'S GRANTS TO ORGANIZATIONS GUIDELINES FOR FISCAL YEARS 1996-97.

11. Project Description. Describe clearly and concisely how the requested and matching funds will be spent. **In the first sentence, identify the specific project for which support is requested**; provide more detail in subsequent sentences. Please limit your project description to the space provided; continuation sheets are not permitted and will not be reviewed.

12. Summary of estimated costs is a recap of **#s 13 through 18** on pages iii and iv of this form.

Direct costs	
Salaries and wages (#13)	$
Fringe benefits (#13)	$
Supplies and materials (#14)	$
Travel (#15)	$
Permanent equipment (#16)	$
Fees and other expenses (#17)	$
Total direct costs	$
Indirect costs (#18)	$
Total project costs	$

⇔

Reminder:	
Amount requested (#3 on page i)	$
Plus **"Total match for this project"** (#19 on page iv of this form)	+ $
Must equal **"Total project costs"**	= $

Items # 13-18 Breakdown of "Summary of estimated costs" #12 on previous page.

13. Direct costs: Salaries and wages (Include artists' compensation if paid on a salary basis. Do not include salaries and wages associated with fundraising.)

Title and/or type of personnel	Number of personnel	Annual or average salary range	% of time devoted to this project	Amount
			Total salaries and wages a.	$
Fringe benefits			**Total fringe benefits b.**	$
			Total Salaries and wages (a. + b.)	$

14. Direct costs: Supplies and materials (List each major type separately.)

	Amount
Total supplies and materials	$

15. Direct costs: Travel (Any foreign travel must be in conformance with government regulations)

Is foreign travel included? Yes ☐ No ☐

TRANSPORTATION OF TRAVELERS

Number of travelers	From	To	Amount
		Total transportation of travelers a.	$

SUBSISTENCE

Number of travelers	No. of days	Daily rate	Amount
		Total subsistence b.	$
		Total travel (a. + b.)	$

Items # 13-18 Breakdown of "Summary of estimated costs" #12 on page ii.

16. Direct costs: Permanent equipment (Equipment costing $5,000 or more per unit with an estimated useful life of more than one year. Written justification is required.)

	Amount
Total permanent equipment	$

17. Direct costs: Fees for services and other expenses (List each item separately; include artists' compensation if paid on a fee basis. Do not include entertainment, fines and penalties, bad debt costs, miscellaneous, contingencies, or costs incurred before the start of the official grant period.)

	Amount
Total fees for services and other expenses	$

18. Indirect costs: (Attach rate negotiation agreement with the National Endowment for the Arts or another Federal agency)

Rate	%	Base	Amount
			$

19. Total match for this project (must equal "total match for this project" in #12 on page ii)

A. Cash match

	Amount
Total cash match a.	$

B. In-kind contributions (identify sources; items must also be shown as direct costs)

	Amount
Total in-kind contributions b.	$

C. Grants (identify sources; do not list any Arts Endowment or other Federal grants)

	Amount
Total grants c.	$

D. Revenues (identify sources)

	Amount
Total revenues d.	$
Total match for this project (a. + b. + c. + d.)	$

20. Financial Information

	Most Recently Completed Fiscal Year	Current Fiscal Year	Next Fiscal Year (Projected)
1. Fund balance (net assets) at beginning of fiscal year	$	$	$
2. Total income	$	$	$
3. Total expenses	$	$	$
4. Surplus (deficit) at year end*	$	$	$
5. Accumulated surplus (deficit)	$	$	$
6. Other net adjustments**	$	$	$
7. Balance at year end	$	$	$
8. Identify any support from the following:			
a. Arts Endowment	$	$	$
b. Other Federal agency	$	$	$
c. Regional arts organization	$	$	$
d. State arts agency	$	$	$
e. Local government sources	$	$	$

Attach a separate sheet to explain:
*Plans for reducing a deficit or utilizing a surplus
**Other net adjustments

Most Recently Completed Fiscal Year (month/year)

____/____ – ____/____

21. Delinquent debt

Are you delinquent on repayment of any Federal debt?

☐ Yes ☐ No *If yes*, please explain on a separate sheet.

22. Additional Authorizing Official (do not duplicate Authorizing Official listed on page i). The Authorizing Official listed on page i of this application form, and any additional Authorizing Official listed below, certify that the information contained in this application, including all attachments and supporting materials, is true and correct to the best of our knowledge. The Authorizing Official(s) also certify that the applicant will comply with the Federal requirements specified under "Assurance of Compliance" on pages 50-51 in the Grants to Organizations, FY 96-97 guideline booklet. If this application is on behalf of a separate component, the Authorizing Official(s) also certify that this unit meets the eligibility criteria for independent components on page 7 of the guideline booklet.

Name: Mr. ☐ Ms. ☐ _____

Title: _____

Area code/Phone and FAX: _____

X

Signature Date Signed

Applicant Name:

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23. APPLICATION SELF-IDENTIFICATION FORM. Using the codes on page vii, choose the most appropriate item in each of the categories and place that code (either numeric or alphabetic) in the corresponding space (see page viii for explanations and definitions).

The data requested on the Application Self-Identification Form (pages vi-viii) is important for the development of a statistical profile on the organizations supported by Federal grants. The information is solicited in response to Public Law 99-383 and 42 U.S.C. 1885C. All information provided will be subject to the provisions of the Freedom of Information Act and the Privacy Act of 1974. NOTE: All information requested in #23 A-F is optional, will not be used in the application review process, and is not a precondition of award.

A. Organization Status -- Using the codes on the opposite page, identify the ONE item which best describes your legal status, e.g., if a not-for-profit theater company, use 020. ➲ [ ]

B. Organization Institution -- Using the codes on the opposite page, identify the ONE item which best describes your organization. Please be as specific as possible. ➲ [ ]

C. Organization Discipline -- Using the codes on the opposite page, identify the ONE item which best describes your area of work in the arts, e.g., if FOLK ARTS/DANCE best describes your area of work, use 120; if DANCE best describes it, use 010. ➲ [ ]

D. Organization Race/Ethnicity -- Using the letter designations on the opposite page, identify the predominant racial/ethnic identity of your board, administrative staff, and audience. If at least half of your board, half of your staff, or half of your audience belong to one of the listed racial/ethnic groups, then use that designation. If there is not a predominant racial/ethnic identify, use "General." **Please identify only ONE item under each of the three headings.**

➲ [ ] Board

➲ [ ] Administrative Staff

➲ [ ] Audience

E. Accessibility/Individuals with Disabilities -- Put a "Y" for Yes in each of the boxes that includes an Individual with a Disability; otherwise leave blank. ➲ [ ] Board [ ] Staff [ ] Artists

F. Accessibility/Older Adults -- Put a "Y" for Yes in each of the boxes that includes an Older Adult (65 years of age or older); otherwise leave blank. ➲ [ ] [ ] [ ]

The following code designations are **only** for use with the Self-Identification Form on page vi:

A. Organization Status

020	Organization -- Nonprofit	060	Government -- Regional	099	None of the above
030	Organization -- Profit	070	Government -- County		
040	Government -- Federal	080	Government -- Municipal		
050	Government -- State	090	Government -- Tribal*		

*Includes Tribal Councils and governing authorities of bands, reservations, or sovereign nations of American Indians/Alaska Natives.

B. Organization Institution

03	Performing Group	19	School District	33	Correctional Institution
04	Perf. Group--College/Univ.	20	School--P.T.A.	34	Health Care Facility
05	Perf. Group--Community	21	School--Elementary	35	Religious Organization
06	Perf. Group--Youth	22	School--Middle	36	Senior (Older Adults) Center
07	Performance Facility	23	School--Secondary	37	Parks and Recreation
08	Museum--Art	24	School--Vocational/Tech.	38	Government--Executive
09	Museum--Other	48	School of the Arts	39	Government--Judicial
10	Gallery/Exhibition Space	25	Other School	40	Govt.--Legislative (House)
11	Cinema	26	College/University	41	Govt.--Legislative (Senate)
12	Independent Press	27	Library	42	Media--Periodical
13	Literary Magazine	28	Historical Society/	43	Media--Daily Newspaper
14	Fair/Festival		Commission	44	Media--Weekly Newspaper
15	Arts Center	29	Humanities Council/Agency	45	Media--Radio
16	Arts Council/Agency	30	Foundation	46	Media--Television
17	Arts Service Organization	31	Corporation/Business	47	Cultural Series Organization
18	Union/Professional Assoc.	32	Community Service Organ.	49	Arts Camp/Institute
		50	Social Service Organization	51	Child Care Provider
				99	None of the above

C. Organization Discipline

010	Dance	060	Design Arts	110	Interdisciplinary
020	Music	070	Crafts	120	Folk & Traditional Arts
030	Opera-Musical Theater	080	Photography	130	Humanities
040	Theater	090	Media Arts	140	Multidisciplinary
050	Visual Arts	100	Literature	150	Non-Arts or Non-Humanities

D. Organization Race/Ethnicity for Board, Administrative Staff, and Audience

N	American Indian/Alaska Native
A	Asian/Pacific Islander
B	Black, not Hispanic
H	Hispanic
W	White, not Hispanic
M	Multi-Ethnic*
G	General
01	Do not choose to answer

*Any combination of two or more racial groups if the combination comprises more than 50% of the total. However, if any one racial group makes up 50% or more of the total, you must use the code for that racial group.

Explanations and Definitions:

A. **Organization Status** -- Self-explanatory

B. **Organization Institution** -- Self-explanatory

C. **Organization Discipline** -- Please select the one code that best describes your primary area of work in the arts.

If you routinely integrate several disciplines into one artform, select Code "110", **Interdisciplinary**.

Folk and traditional arts are those that pertain to oral, customary, material and performance traditions informally learned and transmitted within cultural contexts.

If your area of work fits this description, please select code "120", **Folk & Traditional Arts.**

If your work involves the interpretation of authentic folk and traditional arts (and you fall outside the particular ethnic/folk tradition), please select the appropriate Discipline Code, e.g., "010", **Dance**; "020", **Music**; "070", **Crafts**, etc.

If you routinely undertake a variety of activities in different discipline areas, select the one code that best characterizes your overall work in the arts. If a majority of your work cannot be represented by a single discipline code, please select Code "140", **Multidisciplinary**.

If your work involves technical assistance or services, choose the artform that usually benefits.

D. **Organization Race/Ethnicity**:

American Indian or Alaskan Native. A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.
Asian or Pacific Islander. A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.
Black. A person having origins in any of the black racial groups of Africa.
Hispanic. A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
White. A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
Multi-Ethnic. For organizations only. Any combination of two or more racial groups if the combination comprises more than 50% of the total. However, if any one racial group makes up 50% or more of the total, you **must** use that code for that racial group.

E. & F. **Accessibility** -- An individual with a disability is a person who: has a physical or mental impairment that substantially limits one or more "major life activities," or; has a record of such an impairment, or; is regarded as having such an impairment.

Examples of physical or mental impairments include, but are not limited to, such contagious and noncontagious diseases and conditions as orthopedic, visual, speech, and hearing impairments; cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, mental retardation, emotional illness, specific learning disabilities, HIV disease (whether symptomatic or asymptomatic), tuberculosis, drug addiction, and alcoholism.

"Major life activities" include functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

An older adult is a person who is 65 years or older.

Work Sample Index

OMB 3135-0112 Expires 7-31-97

Applicant Organization:

Work Samples: Refer to "How to Submit Work Samples" on pages 42-43. List the work(s) submitted as part of your application package in the order in which you want them reviewed.

Work Sample A

1. Format (e.g., video, audiotape, compact disc, slides): _____
2. Name of artist(s): _____
3. Title of work sample, site, date: _____
4. Length of sample: _____
5. Cue information (where applicable): _____
6. Special instructions (if any): _____

Work Sample B

1. Format (e.g., video, audiotape, compact disc, slides): _____
2. Name of artist(s): _____
3. Title of work sample, site, date: _____
4. Length of sample: _____
5. Cue information (where applicable): _____
6. Special instructions (if any): _____

Work Sample C

1. Format (e.g., video, audiotape, compact disc, slides): _____
2. Name of artist(s): _____
3. Title of work sample, site, date: _____
4. Length of sample: _____
5. Cue information (where applicable): _____
6. Special instructions (if any): _____

(If necessary, attach an additional copy of this form and label samples D, E, F, . . .)

FOR STAFF USE ONLY:

Application Checklist

OMB 3135-0112 Expires 7-31-97

Complete this checklist and enclose it as the **first** item in your application package. The Endowment will make every effort to review your application and mail this form back to you if any items are missing. However, we cannot guarantee the return of this form and urge you to double check your application before mailing it. Remember: Late applications and applications that are determined to be incomplete will be rejected.

Applicant: _____

Address: _____

Project Director: _____

Area code/Phone: _____

Area code/FAX: _____

E-mail, if available: _____

WWW, if available: _____

All applicants must submit:

Application Checklist (1 copy)
Application Acknowledgment Card (1 copy)
IRS Determination Letter (1 copy)
Application Forms (Original and copies)
Project Narrative, see pages 32-33 (2 copies)
Biographies of key staff and key project-related personnel (2 copies)
Evidence of commitment by all partners, where relevant (2 copies)
If a consortium project, signed agreement between partners (2 copies)
If project is based on copyrighted material, assignment of rights documentation (1 copy)
Work Sample Index, if relevant (1 copy)
If you are applying on behalf of an eligible component, documentation of eligibility (1 copy)

All applicants must also submit relevant materials specific to the theme under which they are applying. Please see the following sections for more detail.

Special Application Requirements for Heritage & Preservation, see pages 35-36, numbers 1 through 7.
Special Application Requirements for Education & Access, see pages 36-37, numbers 1 through 11.
Special Application Requirements for Creation & Presentation, see pages 38-41, numbers 1 through 2h.
Special Application Requirements for Planning & Stabilization, see page 41, numbers 1 through 4.

The following materials are missing and must be received no later than _____ for your application to be considered.

These materials should be mailed to:

_____

NATIONAL ENDOWMENT FOR THE ARTS
NANCY HANKS CENTER
1100 PENNSYLVANIA AVENUE, N.W.
WASHINGTON, DC 20506-0001

Privacy Act. The Privacy Act of 1974 requires us to furnish you with the following information:

The National Endowment for the Arts is authorized to solicit the information in this application (pages i-v and ix-xi) by 20 U.S.C. section 954 et seq. (the National Foundation on the Arts and the Humanities Act of 1965, as amended.) The information contained in the application (including all supplementary materials, such as work samples, submitted with the application) is used in the grant review process. All application materials may be subject to review by the National Council on the Arts in open meeting. The information in your application also may be used for statistical research, analysis of trends, and for Congressional oversight purposes. This information may also be provided to the public upon request after the conclusion of the Endowment's deliberative process, subject to certain exemptions contained in the Freedom of Information Act and, in the case of individuals, the Privacy Act (5 U.S.C. sections 552 and 552a, respectively). By submitting a signed application, you are acceding to the conditions described herein. Failure to provide all requested information may result in the rejection of your application.

Program Coordination: jrb/acj

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National Endowment for the Arts
Nancy Hanks Center
1100 Pennsylvania Avenue, N.W.
Washington, DC 20506-0001

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